

FEE DUE: \$150.00

State of New Hampshire 2014 ANNUAL REPORT

The following information shall be given as of January 1 preceeding the due date Pursuant to RSA 304-C:80. REPORT DUE BY April 1, 2014

ANNUAL REPORTS RECEIVED AFTER THE DUE DATE WILL BE ASSESSED A LATE FEE.

Filed

Date Filed: 04/23/2014

Business ID: 689291

William M. Gardner

Secretary of State

LANE ROOFING LLC ADDRESS OF PRINCIPAL OFFICE: 24 ALYSSA DR 24 ALYSSA DR **DERRY, NH 03038** DERRY, NH 03038 ENTITY TYPE: LLC REGISTERED AGENT AND OFFICE: BUSINESS ID: 689291 LANE, JOSHUA STATE OF DOMICILE: NEW HAMPSHIRE 24 ALYSSA DR RESIDENTIAL ROOFING, REPAIRS **DERRY, NH 03038** If changing the mailing or principal office address, please check the appropriate box and fill in the necessary information. The new mailing address 2 The new principal office address PO Box is acceptable. MANAGERS **MEMBERS** NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE). NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE) В LIST AT LEAST ONE MANAGER BELOW OR MEMBER ON RIGHT MUST LIST AT LEAST ONE MEMBER BELOW IF NO MANAGERS NAME MEMB. Joshua Lane STREET STREET 24 Alyssa Drive CITY/STATE/ZIP Derry NH 03038-4605 CITY/STATE/ZIP NAME NAME STREET STREET CITY/STATE/ZIP CITY/STATE/ZIP NAME NAME STREET STREET CITY/STATE/ZIP CITY/STATE/ZIP NAME NAME STREET STREET CITY/STATE/ZIP CITY/STATE/ZIP NAMES AND ADDRESSES OF ADDITIONAL MANAGERS/MEMBERS ARE ATTACHED To be signed by the manager, if no manager, must be signed by a member. I, the undersigned, do hereby certify that the statements on this report are true to the best of my information, knowledge and belief. Sign here: Joshua Lane Please print name and title of signer: Joshua Lane **MEMBER** NAME TITLE

WHEN THIS FORM IS ACCEPTED BY THE SECRETARY OF STATE, BY LAW IT WILL BECOME A PUBLIC DOCUMENT AND ALL INFORMATION PROVIDED IS SUBJECT TO PUBLIC DISCLOSURE REQUIRED INFORMATION MUST BE COMPLETE OR THE REGISTRATION REPORT WILL BE REJECTED

E-MAIL ADDRESS (OPTIONAL):